



APPLYING

Applying

Principles and Practices of
Functional Behavioral Analysis to
Therapeutic Behavioral Services

Regional Training Part 1: Assessment



OBJECTIVES

Learning Objectives

Module I

Learning Objectives

- Defining characteristics of TBS
- TBS eligibility criteria
- How to conduct a TBS assessment that would include fundamental principles of functional behavioral analysis
- How to develop a TBS client plan that would include behavior intervention practices
- TBS documentation requirements

CHARACTERISTICS

Characteristics of TBS

Module II



Characteristics of TBS

TBS is a behavioral
intervention based on
behavior analysis
principles and practices.



Characteristics of TBS

(See DMH LETTER NO.: 99-03, DMH INFORMATION NOTICE NO.: 99-09)

An Early Periodic Screening, Diagnosis,
and Treatment (EPSDT) Medi-Cal
service

One-to-one therapeutic contact
between provider and beneficiary

Characteristics of TBS

(See DMH LETTER NO.: 99-03, DMH INFORMATION NOTICE NO.: 99-09)

- Short-term
- Goal directed, in support of achieving the lowest appropriate level of placement
- Targets specific behaviors that are barriers to achieving the lowest appropriate level of care

Characteristics of TBS

(See DMH LETTER NO.: 99-03, DMH INFORMATION NOTICE NO.: 99-09)

- Designed to provide the child/youth with skills to effectively manage the behavior(s) that are barriers to achieving lowest appropriate level of placement
- For child/youth with severe functional impairment



Eligibility of TBS

Module III

Eligibility of TBS

- Medi-Cal Beneficiary
- Medical necessity
- Member of the “class” **in Emily Q.** lawsuit

Eligibility of TBS

- Medi-Cal beneficiary
 - Full scope
 - Under the age of 21
- Medical necessity
 - Those DSM-IV diagnoses that are the responsibility of the County Mental Health Plans (see Title 9, California Code of Regulations, Section 1830.205)

Eligibility of TBS

- Member of the TBS “class” in Emily Q. lawsuit
 - Currently in RCL 12 or higher, or
 - At Risk of a RCL 12 or higher, or
(At Risk for placement as defined by the county)
 - One or more emergency hospitalizations in past 24 months, or
 - Previously received TBS

Eligibility of TBS

- Beneficiary is receiving other specialty mental health services, and
- Without TBS the current placement will be jeopardized, or a higher level of placement will be needed, or
- TBS is needed to transition to a lower level of residence

Eligibility of TBS

- TBS is not allowable under the following circumstances:
 - Solely for the convenience of the family or other caregivers, physicians or teachers
 - Solely to ensure self or other's safety (i.e. suicide watch)
 - Solely to provide supervision or to assure compliance with terms and conditions of probation
 - Non-mental health conditions
 - Inpatient, Psychiatric Health Facilities, Institutes for mental disease, skilled nursing facilities, crisis residential programs, and locked juvenile justice settings

Eligibility of TBS

- TBS is not available if:
 - A child or youth will never be able to sustain non-impulsive, self-directed behavior and engage in community activities without full supervision.
 - A child or youth can sustain non-impulsive, self-directed behavior, can handle themselves appropriately in social situations with peers, and can appropriately handle transitions during the day.



ASSESSMENT

Assessment

Module IV



Assessment:

Incorporating Functional Behavioral Analysis

- Assessing and evaluating behavior in context:
 - Age/Development
 - Gender
 - Race, Ethnicity, Culture
 - Sexual Identity
 - Other



Assessment

- Sources of information
 - Review of past assessments and other records
 - Interviews of key informants including parents, caregivers, teachers, other service providers
 - Interview of the youth
 - Observation of the youth in key settings, including residence, school, and community



Assessment

- Determine eligibility for TBS
- Provide specific information needed to develop an effective TBS client plan which includes fundamental principals of functional behavioral analysis
 - Are there specific behavior(s) that are barriers to the lowest appropriate level of care?
 - Target behaviors
 - What specific behavioral interventions are needed to teach the child/youth skills to effectively manage these behavior(s)?



Assessment

What adaptive behaviors
does the child/youth
currently use?



Assessment: Principles of Functional Behavioral Analysis

- Behavior is a form of communication.
- All behavior is goal directed and has a function.
- Understanding the function of maladaptive behavior is critical to developing an effective client plan.



Assessment: Principles of Functional Behavioral Analysis

- Description of the Target Behavior
 - What?
 - When?
 - Where?
 - Who?
 - When, where, and with whom does the behavior **never** occur?



Assessment: Principles of Functional Behavioral Analysis

- TBS assessment needs to document the occurrence of the behavior including:
 - Frequency
 - Intensity
 - Duration



Assessment: Principles of Functional Behavioral Analysis

- Behavior is a function of antecedent events and consequences. Understanding these events is also critical to developing an effective client plan.
- TBS assessment needs to document the “meaning” of the behavior, including the relationship between antecedent events and consequences.



Assessment

- Antecedent events
 - Who is around prior to the target behavior occurring?
 - What is the activity prior to the target behavior?
 - When in the day or night do the behaviors occur?
 - Where is the child or youth prior to the target behavior occurring?



Assessment

- Consequences
 - What is the effect of the behavior?
 - How do others respond?
 - Are there any physiological effects?
 - Are there any social interaction effects?
An increase or decrease in social demands?



Assessment

- Mediating factors
 - Is a health condition contributing to the target behavior?
 - Is there documented evidence of brain injury or other neurological disorder?
 - Does the youth experience difficulty with perception or interpretation? Developmental delay, learning disability, thought disorder, other?
 - Does the youth have cognitive distortions, expectations, beliefs and/or others that contribute to the target behavior?



CLIENT PLAN

Client Plan

Module V



Client Plan: Requirements

- Services must be provided under the direction of a Licensed Practitioner of the Healing Arts (LPHA)
- Specific target behaviors or symptoms listed
- Specific interventions to resolve target behaviors
- Specific outcome measures to demonstrate behaviors have declined/ been replaced



Client Plan: Components

- Individualized to the specific youth and behavior(s)
- Interventions are clearly and concretely described
- Proposed frequency, intensity, duration, and location of TBS is specified
- Detailed description of each intervention
- Individuals responsible for the interventions are noted
- Behavioral goals are clearly and concretely stated
- Steps to transition from, or phase out TBS



Client Plan: Interventions

- Consider age and level of development, gender, race, ethnicity, culture, sexual identity and other unique factors.
- Consider what has been tried in the past, noting both successful and unsuccessful interventions.
- Include a crisis plan.
- Positive behavioral interventions promote the establishment of skills – for the child or youth, family and important others.



Client Plan: Interventions

- Build interventions that can be implemented well, given the child or youth's abilities, and resources available to the family or environment.
- Promote generalization.
- Include transition plan.



Client Plan: Interventions

Creating TBS interventions requires an understanding of positive behavioral intervention; the benefit of a good assessment, creativity, input from the child/youth, their family, and others.



DOCUMENTATION

Documentation

Module VI



Documentation

- Evidence that the youth meets Medi-Cal and Emily Q. lawsuit class requirements
- TBS client plan
- TBS is integrated with overall specialty mental health client plan
- Transition plan
 - All children/youth
 - Those children/youth approaching 21



Documentation

- Notification to State Department of Mental Health
- Authorization forms: for current requirements, check with local MHP
- After services start, progress note for each contact noting provision of service, response, continued need, and likelihood of benefit



Documentation

- TBS client plan addendum
 - Complete when progress in terms of intensity, duration, and frequency is not observed at monitoring intervals and/or when TBS has not been terminated within the original estimated timeframe.
 - Use to:
 - Identify and explain significant changes in the child or youth's environment which may explain the lack of progress
 - Describe circumstances that have presented obstacles to change
 - Identify and explain actions that will be taken such as case consultation, or changes in coaches

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For More Information:

- Mary Jane Alumbaugh, Ph.D. (CIMH)
 - mjalumbaugh@cimh.org
 - (916) 556-3480, ext. 115
- TBS Listserve Address
 - TBS-ON@lists.cimh.org
- TBS Q & A online
 - To post a question, email:
TBS@lists.cimh.org
 - To view past Q&A's, go to: www.cimh.org,
view TBS project and click to review
previously posted questions and answers

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For more information:

www.cimh.org

2030 J Street, Sacramento, CA
(916) 556-3480